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2643

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on 7/13/04
Jeffrey R. Kuester

In Re Application of:

Bezner, et al.

Group Art Unit: 2643

Serial No.: 09/961,411

Examiner: Elahee, MD S

Filed: September 25, 2004

Docket No.: 190252-1670

For: **ON DEMAND CALL RE-TERMINATION**

The following is a list of documents enclosed:

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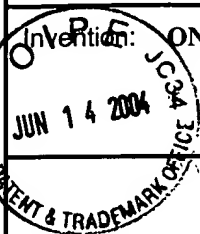
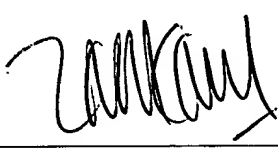
Certificate under 37 CFR § 3.73(b)

Power of Attorney by Assignee of Entire Interest (Revocation of Prior Powers)

Change of Correspondence Address

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

2845

AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. BS01-092		
Applicant(s): ROBERT BEZNER, ET AL.					
Serial No. 09/961,411	Filing Date September 25, 2001	Examiner ELAHEE, MD S		Group Art Unit 2645	
<div style="float:left"></div> INVENTION: ON DEMAND CALL RE-TERMINATION					
<u>TO THE COMMISSIONER FOR PATENTS:</u>			RECEIVED JUN 2 1 2004 Technology Center 2600		
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	33 -	33 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1390</div> <div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div> <div><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div>					
<div style="text-align:center"> _____ <i>Signature</i></div>			Dated: June 14, 2004		
Poh C. Chua, Reg. No. 44,615 SHAW PITTMAN LLP 1650 Tysons Boulevard McLean, Virginia 22102 (703) 770-7900 PCC/lrhj Customer No. 28970 CC:			<div style="border:1px solid black; padding:5px;"><div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="border-top:1px solid black; height:40px; text-align:center; margin-top:10px;"><i>Signature of Person Mailing Correspondence</i></div><div style="border-top:1px solid black; height:20px; text-align:center; margin-top:10px;"><i>Typed or Printed Name of Person Mailing Correspondence</i></div></div>		